CLAIM AMENDMENTS

This listing of claims will replace all prior versions and listings of the claims in the application.

1-58. (Cancelled)

59. (Currently amended) A pharmaceutical composition comprising an agent for suppressing an immune response and at least one agent selected from the group consisting of an EGF receptor ligand and a gastrin/CCK receptor ligand.

60. (Original) The composition according to claim 59, wherein the gastrin/CCK receptor ligand is a gastrin.

61. (Original) The composition according to claim 59, wherein the gastrin/CCK receptor ligand is a gastrin17.

62. (Original) The composition according to claim 61, wherein the gastrin17 is gastrin17Met15 or gastrin17Leu15.

63. (Original) The composition according to claim 59, wherein the EGF receptor ligand is EGF.

64. (Currently amended) The composition according to claim ~~59~~ 63, wherein the EGF is recombinant human EGF51N.

65. (Cancelled)

66. (Original) The composition according to claim 59, wherein the agent for suppressing immune response is at least one selected from of the group consisting of a rapamycin; a corticosteroid; an azathioprine; mycophenolate mofetil; a cyclosporine; a

cyclophosphamide; a methotrexate; a 6-mercaptopurine; FK506 (Tacrolimus); 15-deoxyspergualin; an FTY 720; a mitoxantrone; a 2-amino-1,3-propanediol; a 2-amino-2[2-(4-octylphenyl)ethyl]propane-1,3-diol hydrochloride; a 6-(3-dimethyl-aminopropionyl) forskolin; and a demethimmunomycin.

67-68. (Cancelled)

69. (Original) The composition according to claim 59, wherein the agent for suppressing immune response is at least one selected from the group consisting of: hul 124; BTI-322; allotrap-HLA-B270; OKT4A; Enlimomab; ABX-CBL; OKT3; ATGAM; basiliximab; daclizumab; antithymocyte immunoglobulin; ISAtx247; Medi-500; Medi-507; Alefacept; efalizumab; infliximab; and an interferon.

70-77. (Cancelled)

78. (New) A method of treating a diabetic subject comprising administering to said subject an agent that increases islet neogenesis and an agent that suppresses an immune response, wherein said agent that increases islet neogenesis is an EGF receptor ligand or a gastrin/cholecystekinin (CCK) receptor ligand.

79. (New) The method according to claim 78, wherein said EGF receptor ligand is recombinant human EGF.

80. (New) The method according to claim 78, wherein said EGF receptor ligand is EGF51N.

81. (New) The method according to claim 78, wherein said gastrin/CCK receptor ligand is a human gastrin17.

82. (New) The method according to claim 78, wherein said agent that suppresses an immune response is a corticosteroid.

83. (New) The method according to claim 82, wherein said corticosteroid is dexamethasone.

84. (New) The method according to claim 78, wherein said agent that suppresses an immune response is an agent selected from of the group consisting of ABX-CBL, Alefacept, allotrap-HLA-B270, antithymocyte immunoglobulin, ATGAM, azathioprine, basiliximab, BTI-322, cyclophosphamide, cyclosporine, daclizumab, demethimmunomycin, efalizumab, Enlimomab, Everolimus, FK506 (Tacrolimus), FTY 720, hul 124, infliximab, interferon, ISAtx247, Medi-500, Medi-507, methotrexate, mitoxantrone, mycophenolate mofetil, OKT3, OKT4A, rapamycin, Sirolimus, 2-amino-1,3-propanediol, 2-amino-2[2-(4-octylphenyl)ethyl]propane-1,3-diol hydrochloride, 6-mercaptopurine, 6-(3-dimethyl-aminopropionyl) forskolin, and 15-deoxyspergualin.

85. (New) The method according to claim 84, wherein said rapamycin is Everolimus or Sirolimus.

86. (New) The method according to claim 78, wherein said agent that increases islet neogenesis and said agent that suppresses an immune response are administered sequentially.

87. (New) The method according to claim 78, wherein the subject is a human.

88. (New) The method of claim 78, wherein said subject is administered an EGF receptor ligand, a gastrin/CCK receptor ligand, and said agent that suppresses an immune response.

89. (New) The method according to claim 78, wherein the diabetic subject has recent onset diabetes.

90. (New) The method according to claim 78, wherein said agent that increases islet neogenesis is EGF51N or gastrin 17 and said agent that suppresses an immune response is tacrolimus, Everolimus, daclizumab, ISAtx247, or Sirolimus.